

ATTORNEY'S DOCKET NO.

DECLARATION AND POWER OF ATTORNEY - ORIGINAL APPLICATION

10746/4

As a below named inventor, I hereby declare that:
 My residence, post office address and citizenship are as stated below next to my name.
 I believe I am the original, first and sole inventor (if only one name is listed below) or
 an original, first and joint inventor (if plural names are listed below) of the subject matter which
 is claimed and for which a patent is sought on the invention entitled PACKET TRANSMISSION
DEVICE AND PACKET TRANSMISSION SYSTEM

the specification of which
 (check one)

is attached hereto.

was filed on _____ as Application Serial No. _____ and was
 amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified
 specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this
 application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any
 foreign application(s) for patent or inventor's certificate listed below and have also identified
 below any foreign application for patent or inventor's certificate having a filing date before that
 of the application on which priority is claimed:

PRIOR FOREIGN APPLICATION(S)

COUNTRY	APPLICATION NUMBER	DATE OF FILING (day, month, year)	DATE OF ISSUE (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
Japan	Patent Appln. No. 10-39912	23/Feb./1998		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
				<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

I hereby claim the benefit under Title 35, United States Code, §120 of any United States
 application(s) listed below and, insofar as the subject matter of each of the claims of this
 application is not disclosed in the prior United States application in the manner provided by the
 first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material
 information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the
 filing date of the prior application and the national or PCT international filing date of this
 application:

APPLICATION NO.	FILING DATE (day, month, year)	STATUS (i.e. Patented, Pending, Abandoned)

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this
 application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Edward W. Greason, Esq.
 Reg. No. 18,918

SEND CORRESPONDENCE TO:	DIRECT TELEPHONE CALLS TO: (name and telephone number)
KENYON & KENYON One Broadway New York, New York 10004	Edward W. Greason (212) 425-7200 X108

BEST AVAILABLE COPY

201	FULL NAME OF INVENTOR	FAMILY NAME Okamoto	FIRST GIVEN NAME Satoru	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Tokyo	STATE OR FOREIGN COUNTRY Japan	COUNTRY OF CITIZENSHIP Japan
	POST OFFICE ADDRESS	POST OFFICE ADDRESS as per attached	CITY Tokyo	STATE & ZIP CODE/COUNTRY Japan
202	FULL NAME OF INVENTOR	FAMILY NAME Sato	FIRST GIVEN NAME Ken-ichi	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Tokyo	STATE OR FOREIGN COUNTRY Japan	COUNTRY OF CITIZENSHIP Japan
	POST OFFICE ADDRESS	POST OFFICE ADDRESS as per attached	CITY Tokyo	STATE & ZIP CODE/COUNTRY Japan
203	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
204	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
205	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
206	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 101 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.</p>				
SIGNATURE OF INVENTOR 201 <i>Satoru Okamoto</i>		SIGNATURE OF INVENTOR 202 <i>Ken-ichi Sato</i>		SIGNATURE OF INVENTOR 203
DATE February 9, 1999	DATE February 9, 1999	DATE		
SIGNATURE OF INVENTOR 204		SIGNATURE OF INVENTOR 205		SIGNATURE OF INVENTOR 206
DATE	DATE	DATE		

ATTACHMENT TO PAGE 2 OF
DECLARATION AND POWER OF ATTORNEY

POST OFFICE ADDRESS OF INVENTOR 201 - 202:

C/O NIPPON TELEGRAPH AND TELEPHONE CORPORATION
20-2 Nishi-Shinjuku 3-chome, Shinjuku-ku, Tokyo 163-1419,
Japan